

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

Post Office Box 789

☐Check if different
than previously
reported. (ACC)

Salem

OR

97308

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

01

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles Oakes

Signature of Treasurer

Electronically Filed by Charles Oakes

Date

01

23

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		62887.93
(b) Cash on Hand at Beginning of Reporting Period	62887.93	
(c) Total Receipts (from Line 19)	26397.39	26397.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	89285.32	89285.32
7. Total Disbursements (from Line 31)	24843.98	24843.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	64441.34	64441.34
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	137197.55	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2250.00	2250.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	10795.00	10795.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	13045.00	13045.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	13045.00	13045.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	13352.39	13352.39
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	13352.39	13352.39
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	26397.39	26397.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13045.00	13045.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2889.68	2889.68
(ii) Non-Federal Share.....	5137.22	5137.22
(b) Other Federal Operating Expenditures.....	4475.28	4475.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12502.18	12502.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	12341.80	12341.80
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	12341.80	12341.80
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24843.98	24843.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19706.76	19706.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	13045.00	13045.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13045.00	13045.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7364.96	7364.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7364.96	7364.96

SCHEDULE L (FEC Form 3X)

6 / 28

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party		
NAME OF ACCOUNT KEY LEVIN		

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	10.75	10.75
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	10.75
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	733.25	733.25
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	733.25	733.25
10. DISBURSEMENTS..... (From Line 6)	10.75	10.75
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	722.50	722.50

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**Use separate schedule(s)
for each category of the
Aggregation PageFOR LINE NUMBER:
(check only one)

PAGE 7 / 28

<input type="checkbox"/>	4a	<input type="checkbox"/>	4c	<input checked="" type="checkbox"/>	5
<input type="checkbox"/>	4b	<input type="checkbox"/>	4d		

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial) / Full Organization Name

Oregon Republican Party

Mailing Address c/o Key Bank Levin Account
1500 Edgewater St NWCity State Zip Code
Salem OR 97302Purpose of Disbursement
Bank fees

Transaction ID: 4B80930.E12651

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	7

Amount of Each Disbursement this Period

10.75

Account: 8

SUBTOTAL of Disbursements This Page (optional)

10.75

TOTAL This Period (last page this line number only)

10.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Bob Avery

Mailing Address PO Box 580

City

Junction City

State

OR

Zip Code

97448-0580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 7

Transaction ID: 80930.C89408

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

William Bishop

Mailing Address 6825 SW Raleighwood Ln

City

Portland

State

OR

Zip Code

97225-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 7

Transaction ID: 80930.C89571

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Knute Buehler

Mailing Address 1122 NW Foxwood Pl

City

Bend

State

OR

Zip Code

97701-8606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Orthopedic Center for the
Casc

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 7

Transaction ID: 80930.C89597

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Leroy Cheney

Mailing Address 1915 Westlake Loop

City

Newberg

State

OR

Zip Code

97132-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 7

Transaction ID: 80930.C89584

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Donna Woolley

Mailing Address PO Box 43

City

Drain

State

OR

Zip Code

97435-0043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eagles View Management

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 7

Transaction ID: 80930.C96918

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

2250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 34622-

Purpose of Disbursement
List Management Services - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12418

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1525.00

LIST MANAGEMENT SERVICES -
OR GOP

B.

Full Name (Last, First, Middle Initial)
Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 34622-

Purpose of Disbursement
List Management Services - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12419

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1575.00

LIST MANAGEMENT SERVICES -
OR GOP

C.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address 410 Mill St SE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
Postage--OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12412

Date of Disbursement

/ /

Amount of Each Disbursement this Period

160.00

POSTAGE--OR GOP

SUBTOTAL of Disbursements This Page (optional)

3260.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address 410 Mill St SE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
Postage--OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E12414

Date of Disbursement

/ /

Amount of Each Disbursement this Period

660.00

POSTAGE--OR GOP

B.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address 410 Mill St SE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
Postage--OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E12413

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

POSTAGE--OR GOP

SUBTOTAL of Disbursements This Page (optional)

1160.00

TOTAL This Period (last page this line number only)

4420.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12534

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1183.90

FEA PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12544

Date of Disbursement

/ /

Amount of Each Disbursement this Period

472.30

FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12543

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1278.24

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

2934.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 80930.E12396 Date of Disbursement
Mailing Address 2830 Foxhaven Dr SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 7</div> </div>
City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div>2293.42</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
B. Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 80930.E12397 Date of Disbursement
Mailing Address 2830 Foxhaven Dr SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 7 / 2 0 0 7</div> </div>
City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div>2309.21</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
C. Full Name (Last, First, Middle Initial) LifeWise	Transaction ID: 80930.E12403 Date of Disbursement
Mailing Address 815 SW Bond St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 0 7</div> </div>
City Bend State OR Zip Code 97702-	Amount of Each Disbursement this Period
Purpose of Disbursement Insurance Candidate Name	<div>354.85</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	INSURANCE

SUBTOTAL of Disbursements This Page (optional)

4957.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Oregon Department of Revenue

Mailing Address P.O. Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E14474

Date of Disbursement

/ /

Amount of Each Disbursement this Period

571.98

FEA PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)
Oregon Department of Revenue

Mailing Address P.O. Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E14475

Date of Disbursement

/ /

Amount of Each Disbursement this Period

557.41

FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Belinda Smith

Mailing Address 687 SW Concord Way

City Beaverton State OR Zip Code 97006-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E12398

Date of Disbursement

/ /

Amount of Each Disbursement this Period

585.92

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1715.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 28

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Belinda Smith

Mailing Address 687 SW Concord Way

City Beaverton State OR Zip Code 97006-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E12399

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 1 7 / 2 0 0 7

Amount of Each Disbursement this Period

627.29

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Cindy Taylor

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E12400

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 1 / 2 0 0 7

Amount of Each Disbursement this Period

947.50

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)
Cindy Taylor

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80930.E12401

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 7

Amount of Each Disbursement this Period

400.00

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1974.79

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 / 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Cindy Taylor

Mailing Address 595 Rockwood St SE

City
SalemState
ORZip Code
97306-1756Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80930.E12402

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	7	/	2	0	0	7

Amount of Each Disbursement this Period

759.78

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

759.78

TOTAL This Period (last page this line number only)

12341.80

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 / 28

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS ConnectNature of Debt (Purpose):
Fundraising Phone Calls
OGOP

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

21811.30

Transaction ID: LS80930.E9436

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21811.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, IncNature of Debt (Purpose):
List Management Services -
OR GOP

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

7773.55

Transaction ID: LS80930.E12418

Amount Incurred This Period

2364.29

Payment This Period

3100.00

Outstanding Balance at Close of This Period

7037.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
United States TreasuryNature of Debt (Purpose):
FEA Payroll Taxes

Mailing Address US Department of Treasury

City State ZIP Code
Ogden UT 84403-

Outstanding Balance Beginning This Period

26705.63

Transaction ID: LS81223.E16564

Amount Incurred This Period

3477.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

30183.46

1) **SUBTOTALS** This Period This Page (optional).....

59032.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 / 28

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wes LemattaNature of Debt (Purpose):
Contribution Refund

Mailing Address 800 NE Tenney Rd Ste 110

City State ZIP Code
Vancouver WA 98685-2899

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS81208.E16256

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Donna WoolleyNature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 43

City State ZIP Code
Drain OR 97435-0043

Outstanding Balance Beginning This Period

4000.00

Transaction ID: LS81116.E15762

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joan AustinNature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 209

City State ZIP Code
Newberg OR 97132-0209

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS81116.E15755

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

9000.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 / 28

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LifeWiseNature of Debt (Purpose):
Insurance

Mailing Address 815 SW Bond St

City State ZIP Code
Bend OR 97702-

Outstanding Balance Beginning This Period

354.85

Transaction ID: LS80930.E12403

Amount Incurred This Period

0.00

Payment This Period

354.85

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage - OR GOP

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-6042

Outstanding Balance Beginning This Period

268.00

Transaction ID: LS80930.E12417

Amount Incurred This Period

0.00

Payment This Period

268.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T WirelessNature of Debt (Purpose):
Phone service

Mailing Address PO Box 30459

City State ZIP Code
Los Angeles CA 90030-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LS80930.E11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

1) **SUBTOTALS** This Period This Page (optional).....

67180.90

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 / 28

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Integra TelecomNature of Debt (Purpose):
Phone service

Mailing Address PO Box 34988

City State ZIP Code
Seattle WA 98124-1988

Outstanding Balance Beginning This Period

1313.73

Transaction ID: LS80930.E12420

Amount Incurred This Period

0.00

Payment This Period

1313.73

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ricoh Customer Finance Corp.Nature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 310010273

City State ZIP Code
Pasadena CA 91110-0001

Outstanding Balance Beginning This Period

153.49

Transaction ID: LS81028.E15616

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Corporate CardNature of Debt (Purpose):
Travel/office supplies

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

306.79

Transaction ID: LS81208.E16323

Amount Incurred This Period

973.77

Payment This Period

0.00

Outstanding Balance at Close of This Period

1280.56

1) **SUBTOTALS** This Period This Page (optional).....

1434.05

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 28

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Oregon Federation of College Republicans

Nature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 808

City	State	ZIP Code
Corvallis	OR	97339-0808

Outstanding Balance Beginning This Period

550.00

Transaction ID: LS81213.E16376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

550.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

550.00

2) **TOTALS** This Period (last page this line number only)..... ▶

137197.55

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

137197.55

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Oregon Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- X Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Oregon Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

 Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 24 / 28
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NONFED 3009
S-Key Key Bank NonF

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	0	7

TOTAL AMOUNT TRANSFERRED

4189.09

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

4189.09

Transaction ID: H380930.C89677

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 25 / 28
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NONFED 3009
 S-Key Key Bank NonF

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 2 9 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

3154.14

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3154.14

Transaction ID: H380930.C89680

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 26 / 28
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NONFED 3009
S-Key Key Bank NonF

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	7

TOTAL AMOUNT TRANSFERRED

6009.16

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6009.16

Transaction ID: H380930.C89683

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

13352.39

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

13352.39

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 27 / 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Certified Property

Mailing Address

PO Box 269

City	State	Zip Code
Salem	OR	97308-0269

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6122.58

Date 01 / 01 / 2007

Transaction ID: H480930.E12395

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2204.13

3918.45

6122.58

B. Full Name (Last, First, Middle Initial)
 U.S. Postmaster

Mailing Address

410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
Postage--OR GOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8026.90

Date 01 / 31 / 2007

Transaction ID: H480930.E12415

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

47.52

84.48

132.00

C. Full Name (Last, First, Middle Initial)
 Pitney Bowes Credit Corp

Mailing Address

P. O. Box 85460

City	State	Zip Code
Louisville	KY	40285-5460

Purpose of Disbursement:
Equipment LeaseCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6313.17

Date 01 / 16 / 2007

Transaction ID: H480930.E12416

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

68.61

121.98

190.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2320.26

4124.91

6445.17

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	28 / 28
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Pitney Bowes Purchase Power

Mailing Address

PO Box 856042

City	State	Zip Code
Louisville	KY	40285-6042

Purpose of Disbursement:
Postage - OR GOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6581.17

Date

M	M
0	1

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H480930.E12417

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

96.48

171.52

268.00

B. Full Name (Last, First, Middle Initial)
 Integra Telecom

Mailing Address

PO Box 34988

City	State	Zip Code
Seattle	WA	98124-1988

Purpose of Disbursement:
Phone serviceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7894.90

Date

M	M
0	1

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H480930.E12420

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

472.94

840.79

1313.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

569.42

1012.31

1581.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

2889.68

5137.22

8026.90